


1 FROM (COMPANY NAME) OIL, GAS AND MINING ADDRESS 355 W NORTH TEMPLE 3 TRIAD CENTER CITY STATE ZIP CODE (REQUIRED) SALT LAKE CITY UT *84180-1203 SENT BY (NAME/DEPT.) PHONE L BRAXTON 538-5340		ORIGIN AIRBILL NUMBER 513653770 4/ CUSTOMER AIRBORNE EXPRESS ACCOUNT NUMBERS SENDER 37762079 RECEIVER 1209-2092-8		AIRBORNE EXPRESS EXECUTIVE OFFICES P.O. BOX 662, SEATTLE, WA 98111 THANK YOU FOR SHIPPING WITH AIRBORNE EXPRESS!  USE THIS AIRBILL FOR SHIPMENTS WITHIN THE U.S. & TO AND FROM PUERTO RICO. ABSENT A HIGHER SHIPMENT VALUATION, CARRIER'S LIABILITY IS LIMITED TO \$9.07 PER POUND PER PIECE. SPECIAL OR CONSEQUENTIAL DAMAGES ARE NOT RECOVERABLE. SEE TERMS AND CONDITIONS ON REVERSE SIDE OF THIS NON-NEGOTIABLE AIRBILL. SCAC AIRB FED ID NO. 91-0837469
2 TO (COMPANY NAME) HI PLAINS MINERALS ADDRESS 500 W FARMERS AVE P O 30400 CITY STATE ZIP CODE (REQUIRED) AMARILLO TX 79120-0400 ATTN: (NAME/DEPT.) PHONE BILL FLY 243-0711		5 METHOD OF PAYMENT (ASSUMED SENDER UNLESS OTHERWISE NOTED) <input type="checkbox"/> BILL SENDER <input checked="" type="checkbox"/> BILL RECEIVER AIRBORNE ACCOUNT NO. <input type="checkbox"/> BILL 3rd PARTY CHECK NO. / AMOUNT <input type="checkbox"/> PAID IN ADVANCE BILLING REFERENCE (WILL APPEAR ON INVOICE)		
DESCRIPTION DOCUMENTS XXXX TONY M/FRANK M SHIPMENT VALUATION \$. PREPRINT FORMAT NO.		6 NO. OF PACKAGES WEIGHT (LBS.) 1 82 7 CHECK IF <input checked="" type="checkbox"/> LETTER EXPRESS SPECIAL INSTRUCTIONS <input type="checkbox"/> SATURDAY DELIVERY <input type="checkbox"/> HOLD AT AIRBORNE EXPRESS <input type="checkbox"/>		
3 <input type="checkbox"/> DECLARED VALUE OR FULL INSURANCE SENDER SIGNATURE <i>James P Braxton</i> DATE 5/4/89		Subject to terms ON REVERSE SIDE OF SENDER'S COPY \$. AIRBORNE SIGNATURE <i>5/4 1635</i> DATE TIME ROUTE 014		
DROPOFF LOCATION AIRBORNE DROPOFF TERMINAL BOX No.				

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